

P07000018626

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

(Business Entity Name)

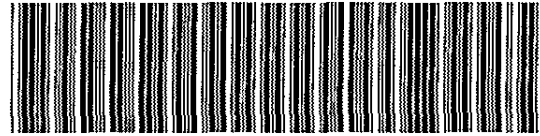
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*see 2/6*



EXPRESS CORPORATE FILING SERVICE, INC.  
1000 PONCE DE LEON BLVD., STE: 101, CORAL GABLES, FL 33134  
PH: (305)444-4994 FAX: (305)444-4977

ATTN: DIANE CUSHING  
FROM: YANET AVILA

PLEASE APPLY CREDIT TO THE ATTACHED  
ARTICLES OF INCORPORATION

YOU HAVE PAYMENT  
REF: NISSI FLORES DE TANIA, INC.

RECEIVED

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DIVISION OF CORPORATE FILINGS  
TALLAHASSEE, FLORIDA

EXPRESS CORPORATE FILING SERVICE INC.

Requestor's Name

1000 PONCE DE LEON BLVD. SUITE:101

Address

CORAL GABLES, FL 33134 (305) 444-4994

City/State/Zip Phone #

OFFICE USE ONLY

CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known):

- 1. ALLCOVER ROOFING, INC.  
(Corporation Name) (Document #)
- 2. \_\_\_\_\_  
(Corporation Name) (Document #)
- 3. \_\_\_\_\_  
(Corporation Name) (Document #)
- 4. \_\_\_\_\_  
(Corporation Name) (Document #)

- Walk in
- Pick up time \_\_\_\_\_
- Certified Copy
- Mail out
- Will wait
- Photocopy
- Certificate of Status

NEW FILINGS	
<input checked="" type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/ Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/ QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

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 SECRETARY OF STATE  
 TALLAHASSEE, FLORIDA

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Examiner's Initials	
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**ARTICLES OF INCORPORATION**

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

**ARTICLE I NAME**

The name of the corporation shall be:  
ALLCOVER ROOFING, INC.

**ARTICLE II PRINCIPAL OFFICE**

The principal place of business/ mailing address is:  
11740 SW 14 STREET  
MIAMI, FL 33184

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:  
AMY AND ALL LAWFUL BUSINESS

**ARTICLE IV SHARES**

The number of shares of stock is:  
SHARES: 1000

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

List name(s), address(es) and specific title(s):  
FRANK OTERO (P/D)  
BERNARDO JORGE CASTILLO (V/D)  
11740 SW 14 STREET  
MIAMI, FL 33184

**ARTICLE VI REGISTERED AGENT**

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:  
BERNARDO JORGE CASTILLO  
11740 SW 14 STREET  
MIAMI, FL 33184

**ARTICLE VII INCORPORATOR**

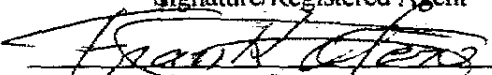
The name and address of the Incorporator is:  
FRANK OTERO  
BERNARDO JORGE CASTILLO  
11740 SW 14 STREET  
MIAMI, FL 33184

\*\*\*\*\*  
*Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity*

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

  
\_\_\_\_\_  
Signature/Registered Agent

01-08-07  
\_\_\_\_\_  
Date

  
\_\_\_\_\_  
Signature/Incorporator

01-08-07  
\_\_\_\_\_  
Date